	PATENT A	Effect	ive Octob		1066233f									
CLAIMS AS FILED - PART I (Column 1)						(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN R SMALL ENTITY		
то	TAL CLAIMS		9					RAT	Ε	FEE		RATE	FEE	
FOR			NUMBER FILEO		NUMBER EXTRA			BASIC	FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			9 minus 20=		. 0			X\$ 9	=		OR	X\$18=		
INDEPENDENT CLAIMS) minus 3 =		. 0			X43	\dashv	-		X86=		
			1103 0 =		<u>,</u>		A43	-		OR				
MULTIPLE DEPENDENT CLAIM PRESENT							J	+145	=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTA	۱L		OR	TOTAL		
CLAIMS AS AMENDED - PART II										ENTITY	OR	OTHER SMALL E		
	9-1-5	(Column 1)		(Colur			1	SINA			J		ADDI-	
AMENDMENT A		CLAIMS REMAINING		NUM	BER	PRESENT	1	RATE	E	ADDI- TIONAL		RATE	TIONAL	
		AFTER AMENDMENT		PREVIO PAID		EXTRA				FEE			FEE	
	Total	. 8	Minus	" 2	0	=	1	X\$ 9=		OR				
MEN	Independent	. 4	Minus	*** 3	7	=/		X43:			OR	X 86 =	201.00	P
٧	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	+145	_		OR	+290=		
											OR	TOTAL	200.	w
ADDIT. F											Jon	ADDIT. FEE		1
	(Column 1) (Column 1) (Column 1) HIGH					(Column 3	٦			ADDI-	ì		ADDI-	1
AMENDMENT B		REMAINING		NUM	BER OUSLY	PRESENT EXTRA		RAT	Ε	TIONAL		RATE	TIONAL	
		AFTER AMENDMENT		_	FOR	CATTO	4			FEE	1		FEE	ł
	Total	*	Minus	**		=	4	X\$ 9)=		OR	X\$18=		1
NE NE	Independent		Minus	***		<u> </u>	-	X43	=		OR	X86=		
Ľ	FIRST PRESE	NTATION OF MI	JITIPLE DE	PENDEN	CLAIM		J	+145	j=		OR	+290=		
TOTAL											OR	TOTAL ADDIT FEE	,	1
ADDIT. FEE												ADDII. FEE		1
 		(Column 1) CLAIMS			mn 2) HEST	(Column 3	٦.		_	ADDI-	1		ADDI-	┨
ပ	`	REMAINING		NUN	IBER OUSLY	PRESENT		RAT	F	TIONAL		RATE	TIONAL	
		AFTER AMENDMENT			FOR	EXITA	4			FEE	1		FEE	4
₩ Q	Total		Minus	**		=		X\$ 9)=		OR	X\$18=		
AMENDMENT C	Independent	*	Minus	***]=	1	X43	=		OR	X86=]
	FIRST PRESENTATION OF MULTIPLE DEPENDE			PENDEN	T CLAIM		J [*]				1			1
					_ •00 :	duma 2		+145			OR			4
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												L	4	
	MEAL - MICH A AL.	imber Previously P nber Previously Pa	old Ear IN Th	IIS SPACE	ie loce th:	an 3 enter 3.	•	und in th	е ар	propriate bo	x in c	otumn 1.		

Application or Docket Number